*U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

	REC'D JL 2025
E	Place says

1. File Number U - 🔯

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2. Fiscal Year Covered From:

	61/01/2009 Through: 2/31/2009					
3. Name and address of person filing.	4. Name, file number, and address of labor organization.					
Name Frank V Lotter	Name					
	Labor Organization File Number					
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any					
Street Edg 3 Airport	Street 94.60 002 33444					
City	City A Section 1					
State ZIP Code + 4	State ZIP Code + 4 9 7 7 7 7					
5. Position in labor organization.						
Enter appropriate data below if, during the past flacet year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions): A. Held an interest in, engaged in transactions (including losses) with, or derived income or other economic benefit of						
A. Held an interest in, engaged in transactions (including loans) with, or o	derived income or other economic benefit of					
A. Held an interest in, engaged in transactions (including loans) with, or a monetary value from an employer whose employees your organization.	on represents or is actively seeking to represent.					
A. Held an interest in, engaged in transactions (including loans) with, or o	on represents or is actively seeking to represent.					
A. Held an interest in, engaged in transactions (including loans) with, or omentary value from an employer whose employees your organization. 6. Name and address of Employer (including trade name, if any).	on represents or is actively seeking to represent.					
A. Held an interest in, engaged in transactions (including loans) with, or omonetary value from an employer whose employees your organization. 6. Name and address of Employer (including trade name, if any).	on represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income. A					
A. Held an interest in, engaged in transactions (including loans) with, or of monetary value from an employer whose employees your organization. 6. Name and address of Employer (including trade name, if any).	on represents or is actively seeking to represent.					
A. Held an interest in, engaged in transactions (including loans) with, or of monetary value from an employer whose employees your organization. 6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bidg., Room No., if any	7.a. Nature of Interest, Transaction, or Income. 7.b. Amount.					
A. Held an interest in, engaged in transactions (including loans) with, or of monetary value from an employer whose employees your organization. 6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street	7.a. Nature of Interest, Transaction, or Income. 7.b. Amount.					
A. Held an interest in, engaged in transactions (including loans) with, or of monetary value from an employer whose employees your organization. 6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bidg., Room No., if any Street City.	7.a. Nature of interest, Transaction, or income. 7.b. Amount.					

Telephone Numbe

Name of Person Filing	File Numb	er U-	3564		
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.					
8. Name and address of Business (including trade name, if any). Name Trade Name; if any: P.O. Box, Bldg., Room No., Nam Street City State	9. Business deals with: a. Labor Organization b. Trust c. Employer	P	-		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.				
Trade Name, if any: P.O. Box, Bidg., Room No., if any Street City State	11.b. Approximate dollar value of such de 12.a. Nature of interest held or Income		1		
	12.b. Amount.				
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.					
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name Trade Name, if any:	14.s. Nature of payment.				
P.O. Box, Bldg., Room No., Many Street ZilP Code + 4	* NA				
13.b. is the Business an Employer Consultant 2	14.b. Amount of payment.				